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STATE OF CONNECTICUT

DEPARTMENT OF MENTAL HEALTH
AND ADDICTION SERVICES
A HEALTHCARE SERVICE AGENCY

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**Testimony by Thomas A. Kirk, Jr., Ph.D. Commissioner
Department of Mental Health & Addiction Services
Before the Appropriations, Human Services and Public Health Committees
September 22, 2008**

CMHS BLOCK GRANT HEARING

Good morning, Senator Harp, Senator Harris, Senator Handley, Representative Merrill, Representative Villano, Representative Sayers and distinguished members of the Appropriations, Human Services and Public Health Committees. I am Dr. Thomas Kirk, Commissioner of the health care agency known as the Department of Mental Health and Addiction Services. I am here today to present the Allocation Plan for the Community Mental Health Services Block Grant for federal fiscal year (FFY) 2009.

The document before you describes the Block Grant contribution to the overall funding of mental health services for adults and children. The Allocation Plan contains proposed expenditures and services for FFY 2009. I would like to highlight the following items for adults:

Block Grant dollars fund the following program types for adults with a serious mental illness:

- A. **Emergency/Crisis Services** are available 24 hours a day, seven days a week.
- B. **Outpatient Clinical Services** are provided to improve or maintain the psychological or social functioning of adults with chronic mental illness.
- C. **Residential Services** offer a variety of housing opportunities, including supported and supervised apartments.

- D. **Employment Opportunities** consist of specialized, work-related services and supports which enable persons with a psychiatric disability to participate in a competitive labor market.
- E. **Case Management Services** assist persons we serve by ensuring that they are actively linked to all the services they need in order to remain in the community. Enhanced emphasis is placed on addressing the homeless population through these services.
- F. **Social Rehabilitation Programs** assist with daily living skills, improving peoples' interpersonal skills, and maintaining their lives.

A total of 26 programs are currently offered through 17 agencies to adults who are indigent and challenged with chronic mental illness. These services are essential and need to be continued, as they support persons who have been discharged into the community and are consistent with our emphasis on recovery-oriented services, i.e., these that focus not only on managing one's illness, but also on improving quality of life and one's reintegration with his/her community.

Also, DMHAS continues to support project initiatives with FFY 2009 CMHS Block Grant funds including:

- (1) Programs within community-based, general hospital emergency departments which support the rights of persons who are mentally ill;
- (2) Parental support and parental rights for families of those with mental illness;
- (3) Residential and/or case management services; and
- (4) Enhanced consumer vocational/employment support services.

While this funding represents less than one percent of the total DMHAS budget, considerable attention was given to the Allocation Plan in order that it be supportive of the

direction given to us by the Adult State Mental Health Planning Council and other advisory bodies.

The Allocation Plan before you assumes a federal Block Grant of \$4,385,316. Actual funding for FFY 2009 will not be known until Congress passes its budget. This figure assumes that the Block Grant will be funded at the same level as FFY2008 federal appropriation.

Of the FFY 2009 CMHS Block Grant's estimated appropriation, \$3,069,721 is allocated to adult mental health services and thirty (30) percent, or \$1,315,595, is allocated to the Department of Children and Families (DCF). DCF will address their portion of the Block Grant separately.

Thank you for the opportunity to testify before you today on the Community Mental Health Services' Block Grant. I would be happy to take any questions you may have at this time, or I could do so following the Department of Children and Families' presentation, if that would be more convenient.